MANAGEMENT COUNCIL

JOHN WICKER

KELVIN DRISCOLL LISA M. GARRETT

MARCIA MAYEDA MARGARET DONNELLAN RAFAEL CARBAJAL RUTH WONG SHERYL L. SPILLER

LOS ANGELES COUNTY MANAGEMENT COUNCIL

APPLICATION FOR MEMBERSHIP

Creating and Strengthening	Name:	
STEVEN J. GOLIGHTLY PRESIDENT	Payroll Title:	
KEITH KNOX VICE-PRESIDENT	Item No.:	
STEVEN HERNANDEZ SECRETARY	Employee No.:	
DAVID TURLA TREASURER	Department Name:	
EXECUTIVE COMMITTEE	Department No.:	
ARMAND MONTIEL CYNTHIA BANKS DERRICK ROBINSON EPIFANIO PEINADO HENRY ROMAN	Office Mailing Address:	

Room #

E-Mail Address:

				DEDUCTION CODE						
				LO	S ANGELES	COUNTY MANAGEMEN	E0111			
		•				DO NOT WRITE ABOVE THIS LINE				
EMPLOYEE NUMBER DEPT.NO				EMPOYEE LAST NAME				FIRST NAME N		
NOT TO BE USED FOR COUNTY INSURANCE PLANS						I HEREBY AUTHORIZE THE AUTHOR OF THE COUNTY OF LOS ANGELES OR HIS AGENTS TO DEDUCT MONTHLY FROM SALARY EARNED BY ME IN ANY DEPARTMENT OR DISTRICT OF THE COUNTY OF LOS ANGELES. THE AMOUNT SHOWN HEREON AND TO PAY SAME TO:				
CHANGE	DEDUCTI	ON AMOUNT		DEDUCT % LOS ANGELES (IGELES COL	JNTY MANAGEMENT	COUNCIL		
INDIC.	OLD	NEW		OLD	NEW	IF ALL OR ANY PORTION OF THIS D	EDUCTION AUTHORIZ	7ATION INCLUDES INSURANCE PRE	MIUMS AND/OR EMI	PLOYEE ORGANIZATION
NEW		8	00			DUES, I ALSO AUTHORIZE THE AUDITO COMPLY WITH ADJUSTMENTS IN COU PLANS, OR TO COMPLY WITH DUES SO WITH SUCH ORGANIZATIONS' CONSTIT	JNTY SUBSIDY AMOU CHEDULES DETERMIN	NTS OR IN PREMIUMS UNDER EXI IED BY SAID EMPLOYEE ORGANIZA	STING CONTRACTS TIONS' GOVERNING	WITH SAID INSURANCE BODY IN ACCORDANCE
REPL. CANC.						THIS AUTHORIZATION CANCELS AN AND SHALL REMAIN IN EFFECT UNTIL AUDITOR, HIS AGENTS, OR THE COUN DELAY IN MAKING THE DEDUCTION OR	ID REPLACES ANY PR L CANCELLED BY ME ITY ACTING UNDER T	EVIOUSLY SIGNED BY ME WITH THI E BY WRITTEN NOTICE. I EXPRES HIS AUTHORIZATION SHALL NOT B	S DEDUCTION AGEN	ICY FOR THIS PURPOSE AND AGREE THAT THE
STOP DATE	ļ	LIMIT AMOUNT				BEBY INWINING THE BEBOOTION ON	TATMENTO HERE X	THORIZED.		
PAYROLL DEDUCTION AUTHORIZATION					DATE		SIGNATURE OF EMPLOYEE	76E562 9/79	RBF 1677	

Please send the completed application and the Payroll Deduction Card to:

D'Nedra Fox LACMC - Membership 12900 Crossroads Parkway So. City of Industry, CA 91746